

CME Credit FORM

**Joint Genetics/Endocrinology Clinical Case Conference
NICHD, Building 10, Bunim Room (9S235)**

PRESENTED BY: **Office of the Clinical Director, NICHD**

To obtain certification of attendance, please complete this form. You may leave it at the table in the back of the room at the conclusion of the conference or mail the form to Stephen G. Kaler, MD, MPH, Office of the Clinical Director, NICHD, Building 10, Room 9S261, Bethesda, MD, 20892-1834.

Please indicate hours attended per day:

I have attended the following session of the Joint Genetics/Endocrinology Clinical Case Conference:

_____ (Total of 1 hour) _____ hour attended
date of presentation

Certificate of attendance should be mailed to: (please print)

Name - Last First MI Professional Degree

Phone Email Organization Institute/Center

Dept/Branch

Street Address/P.O. Box

City State Zip Code

The NIH/FAES designates this educational activity for a maximum of 11 credit hours in Category 1 credit towards the AMA Physician's Recognition Award. Each physician should claim only those hours of credit actually spent in the educational activity.